

# DRAFT

## ISD Requirements Worksheet

SSR Number(s): **2003-0202-01**

SSR Title: **Convert Pseudo AHCCCS ID to New  
AHCCCS ID Beginning with 'A'**

Requester(s) Name: **Kathy Bezon**

Requester(s) Phone: **(602) 417-4644**

Subsystem(s): **Recipient/Health Plan**

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Date Prepared: **09/09/2004**

ISD Project Manager: **Dennis Koch**

Version #	Date
001	09/09/2004

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## **1 Signatures (Required)**

### **ISD Representative who prepared the document**

Name: Robert Heppler

(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Project Manager who reviewed/approved the document**

Name: Dennis Koch

(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **AHCCCS (Arizona) User Representative who reviewed/approved the document**

Name: Kathy Bezon

(Please Print)

Implementing:

Yes: ☐ No: ☐

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **MED-QUEST (Hawaii) User Representative who reviewed/approved the document**

Name: N/A

(Please Print)

Implementing:

Yes: ☐ No: ☐

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Testing Representative who reviewed/approved the document**

Name: Lori Petre

(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## **2 Signatures (If Applicable)**

### **ISD Operations Representative who reviewed/accepted the document**

Name: Ron Chapman  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Database Representative who reviewed/accepted the document**

Name: Ming Chen  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Network Services Representative who reviewed/accepted the document**

Name: N/A  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Security Representative who reviewed/accepted the document**

Name: N/A  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Project Manager who reviewed/approved the document**

Name: Mike Upchurch  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ISD Project Manager who reviewed/approved the document**

Name: Janet Vollmer  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### **3 Signatures (If Applicable)**

**ISD Project Manager who reviewed/approved the document**

Name: Liz Liska  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AHCCCS (Arizona )User Representative who reviewed/approved the document**

Name: Patsy Perry  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AHCCCS (Arizona )User Representative who reviewed/approved the document**

Name: Dan Fallon  
(Please Print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## 4 Objective

**All current Recipient records with an AHCCCS ID that does not begin with the letter 'A' must be converted to a new record with an AHCCCS ID that begins with an 'A'.**

## 5 Impacts & Critical Dates

### 5.1 Business & System Impacts

Increase database space needed to accommodate this conversion for Recipient Tables.

Convert records by linking members to the new AHCCCS ID, should eliminate impact to other systems.

Due to volume, all records will not be converted at the same time.

### 5.2 Critical Dates

**Conversion must be completed by January 2005.**

**Begin conversion of data by the first week of December 2004.**

## 6 Agency Benefits

Privacy and confidentiality for members while providing necessary information for health plans, providers, claims and encounters.

## 7 User Business Requirements

Any AHCCCS ID that begins with a numeric value can no longer be a primary ID.

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## **7.1 SSR Description**

**All current primary AHCCCS ID records in the system that do not begin with an ‘A’ will need to be convert to a new AHCCCS ID that begins with ‘A’. The original ID will remain on the system as a Secondary records and will be linked to the new AHCCCS ID.**

## **7.2 Reason for Request (Mandated by law, policy change, etc.)**

**Mandated by State Law prohibiting use of SSN on any correspondence including ID Cards.**

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## 8 Processing Impacts

### ADHOC programs and ADHOC JCL

1. Create ADHOC program to identify all AHCCCS ID records that do not start with an 'A', create new AHCCCS ID beginning with an 'A'.

Link the two records with the new ID as the primary and the old ID as the secondary, follow normal online linking procedures. Copy Demographic information and other Recipient data (Special Program, Medical Condition, etc.) from the old ID to the new ID.

For members with Eligibility in the last three years, copy the last three years of Eligibility to the new AHCCCS ID and terminate the current active Eligibility on the old ID and also terminate the current active Enrollment on the old ID. The New ID will show current Enrollment in the capitated HLP. To avoid paying retroactive capitation on both records, retroactive enrollment that gets copied from the old ID will be changed to FFS (008690).

For members without activity in the past three years, no Eligibility, Enrollment or Medicare information will be copied from the secondary ID to the new AHCCCS ID. These record will only have the required demographic information.

Members with a Date of Death prior to 10/01/2003, will be handled like the records that have not had activity in the past three years.

The linking audit record will be created for each record that was linked.

An Action Record (RL-Recipient Linked) will be created for all currently active linked records and appear on the Daily Roster/834.

Due to the amount of records involved, approximately 177,000 active members of the approximately total of 680,000 members. ISD will plan multiple conversions during the month of December, with the exact number of conversion or how to split not yet determined.

2. Create separate file for the ACE system of all current members that get a new AHCCCS ID. Provide the old secondary ID along with the ACE ID and new AHCCCS ID.
3. In addition to the linked records appearing of the Rosters/834, Create individual files for each Health Plan of the members that get a new AHCCCS ID. Provide the old secondary ID along with the new AHCCCS ID for currently enrolled members.
4. Create special ID card file for Custom Card Solutions. This is required so the health plans are not billed for these ID cards on currently enrolled members, AHCCCS will pay for these

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ID Cards. Custom Card has been notified that some large files outside the normal daily files are planned for December, they will verify their inventory.

5. Create a report file of all records linked, including those that have not had activity eligibility in several years.
6. Create a report file of all linked records that are currently active in CRS, TSC (Targeted Support Coordination), or BHS to distribute to ADHS and DES.
7. Create a report file of all linked records that are currently active in SMIB/HIB buy-in to allow MFIS to review the buy-in records online. The conversion will update the new AHCCCS ID for those RP-SMIB-TR-HR records that previously contained the old AHCCCS ID on the header record.

## 9 Database Impacts

Increased space needs across the Recipient Subsystem (DBID 121). Currently researching the latest CXX data space reports. At least **680,000 new demographic records (RP-DEM-ID)** and **1.2 million new address records (RP-ADDR-ID)** will be created. Approximately **1.2 million new eligibility (RP-ELG-ID)** and **enrollment (RP-ENRL-HP)** records may be added. Medicare records are estimated at **200,000 (RP-MDC-CVG)** new records.

## 10 Security Requirements and Impacts

(Not Applicable)

## 11 Documentation Requirements

Once finalize the file and report layouts will be documented in the System Proposal.

## 12 Outstanding Issues

**Not Critical at this time. When the IVR process get changed early next year, the voice message regarding entering the AHCCCS ID can be changed since all members will have an ID that begins with an 'A'.**

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**13     Assumptions**  
**(Not Applicable)**

**14     Addendum**  
**(Not Applicable)**

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